DRUG DEMAND REDUCTION COMMANDER & FIRST SERGEANT TRAINING

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Overview

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- Demand Reduction Program Goals
- AF Policy on Drug Abuse
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- Commander's Role
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Governing Directives

- **AFI 44-120, Military Drug Demand Reduction Program, 3 JAN 2011**

- **AFI 44-107, Air Force Civilian Drug Demand Reduction Program, 7 Apr 10**

Goals and Objectives of Drug Demand Reduction

- **Enhance mission readiness**
- **Foster a drug free environment**
- **Maintain the health and wellness of a fit and ready fighting force**
- **Deter use/abuse of illegal drugs and other controlled substances**
- **Assist commanders in assessing military fitness and readiness**
- **Detect and identify use of illegal drugs and controlled substances**
- **Provide a basis for action, adverse or otherwise, against a service member based on a positive test result**

AFI44-120 Mission Readiness

- **Studies have shown that products made with hemp seed and hemp seed oil may contain varying levels of tetrahydrocannabinol (THC), an active ingredient of marijuana which is detectable under the Air Force Drug Testing Program.**

- **In order to ensure military readiness, the ingestion of products containing or products derived from hemp or hemp seed oil is prohibited. Failure to comply by military personnel is a violation of Article 92, UCMJ.**

- **The knowing use of any intoxicating substance, other than the lawful use of alcohol or tobacco products, that is inhaled, injected, consumed, or introduced into the body in any manner to alter mood or function is prohibited.**

AFI 44-120 Prohibited Substances

- **Designer drugs such as “spice” that are not otherwise controlled substances)**
- **Inhalants, propellants, solvents, household chemicals, and other substances used for “huffing”**
- **Prescription or over-the-counter medications when used in a manner contrary to their intended medical purpose or in excess of the prescribed dosage**
- **Naturally occurring intoxicating substances (Salvia divinorum)**
- **The POSSESSION of any of the above substances, if done with the intent to use in a manner that would alter mood or function, is also prohibited. Failure to comply is a violation of Article 92, UCMJ**

Air Force Random Drug Testing Policy and Procedure

The Hour Has Come

- **ALL Active Duty Military are subject to random drug testing regardless of rank or position**

- **ALL Civilian Employees in Testing Designated Positions (TDPs)**
  - **The job functions associated with these positions have a direct and immediate impact on public health and safety, the protection of life and property, law enforcement, or U.S. national security**

- **Active Duty and TDP Civilians are selected randomly using the Air Force Drug Testing Program and DOD Drug Testing Program Software, respectively**
  - **Individuals cannot be singled out for random testing**
  - **Individuals may be selected on back-to-back days**

Random Selection Process

- **Computer Generated Selection – Military and Civilian**
- **Trusted Agents notified**
- **Commander Letter is prepared**
- **Members and employees notified**
- **Members and employees have two hours to comply**

Commanders' Responsibilities

- **Commander's have the authority to order drug testing IAW guidelines in AFI44-120 for sweep testing, probable cause testing, and commander directed testing**

- **Ensures that all unit military members regardless of rank or status, are subject to inspection testing.**

- **Will appoint in writing a Trusted Agent who performs the following duties:**
  - **receives and maintains urinalysis selection rosters**
  - **notifies individuals selected for testing**
  - **notifies DDR personnel of members not available for testing (acceptable reasons) with the expected return to duty date**

Commanders' Responsibilities

- Ensure that notification letters are appropriately acknowledged
  - date and time of acknowledgement
  - members' signatures are evident
  - trusted agents' signatures are evident
  - a copy of such notification and acknowledgement letters are maintained within the unit IAW AFM 33-363

- Take appropriate administrative or UCMJ action on personnel who fail to report for testing without a valid reason
  - All actions taken by commanders must be coordinated with the SJA to ensure the integrity of the program.
  - Actions taken against Civilians must include CPO and the SJA

Deferred Testing Process

- **Testing is mandatory on the day of selection <u>EXCEPT</u> for members and personnel who are:**
  - **TDY, on leave, pass, quarters, flying status, crew-rest, missile duty, non-duty status, or deployed**
  - **Shift workers or personnel who work alternative duty weeks with "weekends" during the regular duty week**
  - **Members and personnel with above exceptions will be report for testing within two hours of notification, upon returning to duty.**
  - **Civilians must present within one hour of notification**

Failure to appear for testing without a deferral will be considered a refusal to participate in testing, and will subject an Active Duty member or Civilian employee to the full range of disciplinary actions, including removal from service

Selection of Observers

- **Provide credible observers who meet the following criteria**
  - **Commissioned officer or NCO**
  - **Not selected for testing in the same session as the one in which they are observers**
  - **No UIF (AFI 36-2907)**
  - **No record, *within 5 years*, of conviction by court martial or civilian court for matters NOT involving dishonesty, fraud, or drug abuse.**

  - **No conviction by court-martial or civilian court, non judicial punishment under Article 15, UCMJ, or a Letter of Reprimand or similar administrative action (Letter of Admonishment, Letter of Counseling) for misconduct involving dishonesty, fraud, or drug abuse (including use, possession, or distribution).**

Selection of Observers

- **No pending UCMJ action (court-martial, Article 15)**
- **No pending civilian criminal action**
- **No pending administrative action (Separation or Letter(s) of Reprimand/Counseling/Admonishment for dishonesty, fraud, or other integrity offenses).**
- **Not within six months of either separation or retirement**
- **No medical or mental health conditions which will prevent the individual from performing the assigned duties of an observer**
- **Not assigned to work in any legal office**

Commanders, on a case-by-case basis, make determinations as to whether or not conduct is/was dishonest and/or fraudulent, and may make exceptions to the rule. Commanders will receive advice from the servicing SJA in situations in which it is unclear as to whether past misconduct is disqualifying.

Military “Shy Bladder”

- **If it is believed that an individual has a “shy bladder” DDR must notify the individual’s unit commander who in turn must make arrangements to have the individual evaluated as soon as practical to determine whether the inability to provide a specimen is genuine or constitutes a refusal.**

- **Individuals who have a medically documented history of shy bladder or situational anxiety, or who are documented to have medically verified physical abnormalities that inhibit or preclude observed collection will be allowed to provide a specimen without direct observation upon verification of the medical documentation.**

- **Individuals should be given reasonable time to provide a urine sample. Reasonable time is determined by the local commander.**

Civilian “Shy Bladder”

- **If the donor is unable to provide a valid sample after a first attempt, the donor is given a reasonable amount of fluid to drink for up to 3 hours or until the donor has a provided a new sufficient amount of urine.**

- **If the donor refuses to drink fluids as directed or refuses to attempt to provide a urine specimen, the collection procedure is discontinued and a “refusal to test” is noted.**

- **If after a period of 3 hours the donor is still unable to provide an adequate specimen, the supervisor will be notified of a potential “shy bladder” situation.**

Military Non-Random Testing Types

- **Accident or Safety Mishap**
- **Command Directed Testing – Probable cause does not exist**
- **Consent Testing – Ask individual to consent to testing before using Probable Cause or Command Directed**
- **Inspection Testing – (Unit sweeps)**
- **Probable Cause Testing – Requires search and seizure authorization from the appropriate commander**
- **Rehabilitation Urine Testing**

Military Self Identification Provision for Drug Use

- **An Air Force member may voluntarily disclose evidence of personal drug use or possession to the unit commander, first sergeant, substance abuse evaluator, or a military medical professional.**

- **Commanders will grant limited protection for Air Force members who reveal this information with the intention of entering treatment.**

- **Commanders may not use voluntary disclosure against a member in an action under the Uniform Code of Military Justice (UCMJ) or when weighing characterization of service in a separation.**

  (AFI 44-121, para 3.7.)

Civilian – Other Types of Testing

- **Accident or Safety Mishap**
- **Consent Testing**
- **Reasonable Suspicion Testing**
- **Rehabilitation (Follow-up) Testing**
- **Voluntary Testing**

Accident or Safety Mishap

- **Civilian employees will be subject to testing for evidence of illicit drug use, based upon the circumstances of an accident or safety mishap, if the member's supervisor reasonably concludes an employee's conduct may have caused or contributed to an accident or safety mishap involving personal injury that requires emergency medical treatment, a fatality or at least $2,000 in property damage.**

- **The determination will be coordinated with a higher level supervisor in the functional chain of supervision, CPO and SJA.**

Civilian - Consent Testing

- **After consultation with the SJA, a supervisor may ask any civilian employee to consent to provide a urine specimen for drug testing at any time. The consent must be knowing and voluntary.**

- **An employee who consents providing a urine specimen whose specimen tests positive for an illicit drug without a legitimate medical reason is *not* exempt from disciplinary action as defined in the Safe Haven Provision (AFI 44-107, para 1.5.3.7.).**

Reasonable Suspicion Testing

- **A specific and fact based belief that an employee may have used illegal drugs, *on or off duty*, based on the following:**
  - **Direct observation of drug use/possession and/or physical symptoms of being under the influence of a prohibited/illegal substance.**
  - **A pattern of abnormal conduct or erratic behavior.**
  - **Arrest or conviction for a drug-related offense, or the identification of an employee as the focus of a criminal investigation into illegal drug possession, use, or trafficking.**
  - **Information provided either by reliable and credible sources or independently corroborated.**
  - **Newly discovered evidence that the employee has tampered with a previous drug test.**

  (AFI 144-07, para1.5.3.3 Reasonable Suspicion)

Procedure for Reasonable Suspicion Testing

- If an employee is suspected of illicit drug use or in possession of drug paraphernalia, the appropriate supervisor will gather all information, facts, and circumstances, leading to, and supporting this suspicion.

- A supervisor in the employee's chain makes the determination, after coordination with the SJA, as to whether reasonable suspicion exists in any given case.

- The supervisor will notify the employee in writing of the requirement to provide a urine specimen (under direct observation). (AFI 44-107, para 1.5.3.3.2, 1.5.3.3.3)

Civilian - Voluntary Testing

- **Employees not in TDP may volunteer for unannounced random testing by notifying CPO. CPO will then notify DDR.**

- **Volunteers will be included in the TDP pool and subject to the same random testing conditions as those in TDPs.**

- **An employee who volunteers for the random testing program will remain the TDP pool until the employee withdraws from participation by notifying CPO of such intent at least 48 hours prior to being scheduled for a random test.**

Civilian Safe Haven Provision

- **Disciplinary action for illicit drug use will *not* be initiated for any employee who meets ALL four of the following conditions:**
  - **(1) voluntarily identifies self as a user of illicit drugs *prior* to being notified of the requirement to provide a specimen for testing or being identified through other means**
  - **(2) obtains and cooperates with appropriate counseling or rehabilitation referral services**
  - **(3) agrees to and signs a last chance or statement of agreement**
  - **(4) and thereafter refrains from illicit drug use. This does not preclude disciplinary action for the other misconduct, i.e., possession of drugs or drug paraphernalia (AFI 44-107, para 1.28.)**

Observations, Behaviors and Symptoms

- Constricted or dilated pupils
- Bloodshot eyes
- Odor of alcohol or marijuana
- Nervous
- Sleepy
- Confused
- Exaggerated Politeness
- Combative
- Excited
- Fatigued
- Uncooperative
- Poor Memory
- Fighting
- Slurred ,Slow Speech, Rambling
- Falling , Staggering, Stumbling
- Profuse Sweating
- Slow Reactions
- Crying
- Tremors
- Constantly tardy or absent
- Excessive use of sick leave
- Patterns of absences : day after payday, Monday, Friday
- Missed deadlines, excuses

These symptoms may indicate medical or mental health issues

5-Panel Urinalysis

- Air Force and Civilian drug tests automatically screen for THC, Opiates, Amphetamines, PCP, and Cocaine
- Tests are confirmation tests, not screening tests, therefore the EXACT substance is identified
- Special Request Testing
  - Steroids
  - Salvia Divinorum – Resembles sage, can be chewed, smoked, brewed as tea or vaporized for inhalation, hallucinations are the primary effect and last 3 to 8 hours, effects resemble alcohol intoxication, severe flashbacks and mental health problems can occur with long term use, high doses may to lead to unconsciousness
  - Ecstasy, GHB, other club drugs and non-PCP hallucinogens
- Unable to test for SPICE or abuse of insulin (body builders)

THC-like Substances: SPICE/K2

- **Herbal smoking blends such as Spice/K2 have been available in Europe, Canada and other parts of the world since 2002.**
- **Recently, these materials became available both over the Internet and in US businesses such as “head” and smoke shops.**
- **“Spice” is purported to contain substances with marijuana-like psychoactive effects.**
- **Spi to all active duty personnel (See 9 Jun ndum to AFI in the stat**

Prescription Drugs

- **It shall be unlawful for any person knowingly or intentionally to possess a controlled substance unless such substance was obtained directly, or pursuant to a valid prescription or order, from a practitioner, while acting in the course of his professional practice…(TITLE 21 - FOOD AND DRUGS CHAPTER 13 - DRUG ABUSE PREVENTION AND CONTROL SUBCHAPTER I - CONTROL AND ENFORCEMENT Part D - Offenses and Penalties)**

- **<u>Opioids:</u> Most often prescribed to treat pain, high risk for addiction, overdose and respiratory depression leading to death**
- **<u>CNS Depressants</u>: Used to treat anxiety and sleep disorders, highly addictive, respiratory depression leading to death**
- **<u>Stimulants</u>: Prescribed to treat the sleep disorder narcolepsy and ADHD, these drugs are highly addictive, risk of dangerously high body temperature, seizures, and cardiovascular complications**
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Local Data

- **Marijuana and Amphetamine/Methamphetamine – most popular drugs in the local area followed by:**
  - **Prescription Drugs**
  - **Cocaine**
  - **Heroin**
  - **Local data on Spice/K2 and Salvia unknown at this time**

Positive Test Results

- All positive test results are received by the DDR Program Manager
- All positive test results are certified by the Medical Review Officer (MRO) prior to further notifications
  - MRO must determine whether the member's positive drug test could be caused by prescribed medication or other natural or synthetic substances to which the member has been exposed
  - MRO will review the member's medical and dental records as well as any other documents deemed appropriate in assessing a positive test result
- All certified illegal drug use positive results are then reported to:
  - Individual Commander
  - SFS Investigation
  - AFOSI
  - SJA
  - ADAPT Program Manager

Audit Agency Findings

- Commanders not updating Trusted Agent appointment letter
- Primary Trusted Agents not sending notification letters to subordinate trusted agents via secure means
- Trusted Agents not using proper email settings to ensure they can receive encrypted messages
- Trusted Agents failing to ensure member/civilian has signed and dated notification letter before presenting for urinalysis testing
- Trusted Agents not maintaining a copy of signed, dated, and time stamped letter after Demand Reduction Program copy is returned
- Members not returning notification letter to Trusted Agent
- Members exceeding the two hour maximum reporting time; 1 minute late will require a phone call to the individual's commander

Important Contacts

- **Drug Demand Reduction Program**
  - **Donna Butte – 481-5998, Manager**
  - **Katie Adkins – 481-5998, Assistant Manager & Outreach Services**

- **ADAPT**
  - **TSgt Delapaz and TSgt Gutierrez – 481-5376**

- **Legal**
  - **Capt Stuard – 481-7294**

- **Civilian Personnel Office**
  - **Jane Shank – 481-6648**